

## Registration Document for Recombinant DNA Experiments

Please type or print clearly	RD Number (to be completed by IBC Chair/EHS)
Principal Investigator:	Laboratory Building & Room #
Department:	Telephone No. of PI:

**Section A:** Will the experiment be carried out in *Escherichia coli* or other prokaryotic hosts?

Yes, *Escherichia coli*     Yes, other prokaryotic hosts     No, (Go on to Section B.)

If "yes" describe the specific host, vector, and DNA to be inserted and briefly describe the objectives of the experiments. (Attach additional sheets, if necessary)

Title of Project/Proposal:

Host:

Vectors:

Inserted DNA:

Relevant section of the NIH Guidelines:

Physical Containment:

**SECTION B:** Will the experiments be carried out in eukaryotic cells, including whole plants or animals?

Yes     No, (Go on to Section C.)

If "yes", describe the specific host, vector, and DNA to be inserted and briefly describe the objectives of the experiment.

Host:

Vectors:

Inserted DNA:

Will rDNA molecules contain more than 1/2 of any eukaryotic genome?

If animals are used in research, IACUC Approval No. and Date:

If a viral vector is to be used, will infectious virus be generated?	Relevant section of the NIH Guidelines:	Physical Containment:
<input type="checkbox"/> No <input type="checkbox"/> Yes		

**SECTION C:** Will studies include attempts to obtain expression of foreign gene, other than those used for selection purposes?

No     Yes    If "yes", what protein?

**Section D:** List the potential risks associated with the research and the safety precautions utilized to address those risks:

Potential Risks:

Safety Precautions:

**Section E:** An abstract describing in layman's terms the research and its objectives must be submitted on a separate page.

I acknowledge my responsibility for the conduct of this research in accordance with Section IV-B-4 of the NIH Guidelines.

Principal Investigator signature

Date:

Department Chair signature

Date:

**Below to be completed by IBC Chair/EHS**

The laboratory was certified at BL\_\_\_\_\_ on\_\_\_\_\_ by\_\_\_\_\_

Registration approved on\_\_\_\_\_ by\_\_\_\_\_